

Category: Image April 2015

By

Dr Noreen Rahat Hashmi

Rahbar Medical and Dental College Lahore

The image shows an assembly line of patients and they are being treated and sent out from a machine. There is also a restriction of one ailment per patient. Both these conditions obviously are not pragmatic and defy the ideal health care practice. This picture reflects the sad state of affairs that our current medical profession has turned into, we have become less emphatic and more business oriented in our health care service delivery. This is sad because we are dealing with humans who are most vulnerable when they are sick and expect not only medical care from their health care professionals but also hope and empathy. Unfortunately doctors are trained to learn all about the scientific basis of treating patients but how to manage the emotional aspects of patient care is not emphasized as much. The patients are identified on the basis of their diagnosis rather than applying a holistic approach of understanding patient's needs and their social background. The patients are just another commodity and medicine has become a business. This business model encourages patients to be treated in an assembly line quickly with a battery of tests. Gone are days when clinical sense would take precedent. Now if your patient has a headache get a CT scan, if he is having abdominal pain order a sonogram. There is no time to listen to complaints or do a through examination. Medicine has become more a money making business and less about patient care. Some of the practicing doctors have labs and X-Rays on site and they don't hesitate to order as many tests as possible. This attitude has not only caused economic hardship but also a lack of trust and respect between patient and doctor. It has essentially eroded the very essence of the doctor patient relationship.

If you look closely at the picture you can see the disgust on the facial expression of the patient. He is being told he can only have one complain as he is being rapidly pushed through. It doesn't matter if he is satisfied or not. As long he is pushed out in record time the objective is achieved. The emphasis is on quantity and not only quality. As can be seen from the image there is no hand holding, no caring attitude for the patient. The patient appears to have no voice in how he is being treated. In the western world several studies have shown that the average contact time of physician and patients is no more than 6-8 minutes for each visit.

In Pakistan this is even worse and patients are huddled in the OPDs where there seen quickly, a lot of times the doctor does not have time to listen and starts writing the prescription even before the patient has finished his first sentence. There is no respect for privacy or confidentiality.

This pattern of patient care will have to be changed because the patients are becoming more aware of their rights. They are demanding better care to be treated with respect and individualized care. A counter argument is always given that we are short of resources whether it is physical, manpower or time and this the best that can be done. But the ultimate price of treating patients in an assembly line is very high. The patients run from hospital to hospital trying to find a doctor who will have the time to listen to their concerns and help them. When patients are rushed through they don't not get the proper diagnosis, treatment or preventive care they need which ultimately increases the morbidity and mortality. Doctors hardly take the time to counsel their patients about hazards of smoking or other preventive care issues. This is worse for patients with mental disorders where not only the patients need treatment but the whole family needs to on board with the treatment plan. Can you imagine how a cancer patient would feel when he is rushed and dismissed? He is scared that he will die a miserable painful death and what will happen to him and his family? Unfortunately no one has the time to discuss his medical care with him or his family, let alone his psychological concerns. There is no shoulder to cry on, there is no sense of humanity, kindness for a fellow human being in distress. The only thing that matters is the number of patients seen and nothing else.

The process of training the physicians for being the humane, empathic doctor should start at the medical college entry process. The students should have a detailed evaluation to check their motives for becoming a doctor. Selection criteria for medical school should check for qualities like empathy and professionalism in addition to the academic scores. There should be laws on the number of patients that are seen by a doctor each day and maybe help from trained nurse practitioners and medical assistants can be sought to streamline the process as is done in the west. There should be a limit for the working hours so doctors can effectively take care of their patients. Doctors should get the required training to deal with issues of time constraints and work overload. The respect for patient autonomy and confidentiality must be foremost and the patient should feel that at least some if

not all of his major concerns are addressed in his visit. The patient input in his plan of care is paramount and can't be done when patient is rushed thorough. Strict training requirement to inculcate the values that patient always comes first and treating patient holistically should be implemented. Physicians need to be trained to use more clinical interaction and judgment rater than depending solely on technology to diagnose patients. At the end of day no technology can match a good doctor with great clinical sense and a caring, loving heart.